Political Organization Notice of Section 527 Status

(July 2000)

OMB No. 1545-1693

1		•	-	- MPPLICIS FOR-
	Name of organization			Employer identification number
	Jin Ma	rall for SC H	OUSE	57:1104579
2	Mailing address (P.O. Box or number	er, streepend room or suite nun		
-	<u> </u>	•		
	POBOX 21115 City or town, state, and ZIP code	,		
			26/12	
	CHARLESTO	N SC 6	×1913	
3	E-mail address of organization			
	IMGEEC	H @ AOL. C	om	
4a	Name of custodian of records		lian's address	
	_	P_{α}	Bax 21115	
	Jim Marrill			
	Dim MERRIL	l Cl	ARLESTON SC	29413
5a	Name of contact person		t person's address	the state of the s
	1	10	Box 21115	
4	Jim Marrill	- 4	- 1	26442
		Ch	ARLESTON, SC	074/3
6	Business address of organization (if	different from mailing address s	shown above). Number, street, and i	oom or suite number
		PARK ST	,,,	
	City or town, state, and ZIP code	11127 71		
	City of town, state, and zir code	1 60 300	<i>4</i> 3	
	CHARLESTON	1,5c 294	92	
Par	t II Purpose			
7	Describe the purpose of the organiz	ation		
			for STATE HOW	21
			Francisco (State of State of S	* **
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	······			
Par	t III List of All Related E	ntities (see instructions)		
		ntities (see instructions) 8b Relationship	8c Address	
			8c Address	
	Name of related entity M/A		8c Address	
	Name of related entity M/A		8c Address	
			8c Address	
8a	Name of related entity N/A RECEIVED		8c Address	
8a	Name of related entity N/A RECEIVED		8c Address	
	Name of related entity M/A		8c Address	
8a	Name of related entity N/A RECEIVED		8c Address	
8a	Name of related entity N/A RECEIVED		8c Address	
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8a	Name of related entity N/A RECEIVED		8c Address	
8a	Name of related entity N/A RECEIVED		8c Address	
8a	Name of related entity N/A RECEIVED		8c Address	

For Paperwork Reduction Act Notice, see page 4.

Cat. No. 30405V

Form **8871** (7-2000)



Part IV List of All Officers, Directors, and Highly Compensated Employees (see instructions)			mpensated Employees (see instructions)
9a Name	7	9b Title	9c Address
Jim	Marrin	CANDIDATE	174 Etimen PAZK ST Chas SC 29492
			
	<u></u>		
Sign Here	Under penalties of perjury, I deck Revenue Code, and that I have ex it is true, correct, and complete. Signature of authorized off	ramined this notice, including acco	Part I is to be treated as an organization described in section 527 of the Internal ompanying schedules and statements, and to the best of my knowledge and belief,
	\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ 	A	F 9971 (7.2000)